

I do hereby certify that the attached report is true, accurate, and complete as best I can present the facts pertinent to this complaint. I am available for interview by investigators from \_\_\_\_\_ to \_\_\_\_\_ on \_\_\_\_\_.

I understand that the officer against whom this complaint is filed may be entitled to request a hearing before a Board of Inquiry. By signing and filing this complaint, I hereby agree to appear before a Board of Inquiry, if one is requested by an office, and to testify under oath concerning all matters relevant to this complaint. If a hearing is held, the officer and/or his attorney has a right to be present and to cross examine me concerning any testimony that I might give.

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Signature of Complainant

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Date and Time

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Refused to Sign (Yes/No)

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Officer Receiving Complaint

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Date, Time and Case Number

**Williamsburg Police Department  
Complaint Against Personnel**

**Case Number** \_\_\_\_\_

Complainant_____	Date_____
Address_____	Age_____Sex_____
_____	Home Phone#_____
Parent/Guardian_____	Business Phone #_____
Nature of Occurrence_____	Parent Phone #_____
Location of Occurrence_____	Complaint Arrested?_____
Date/Time of Occurrence_____	Arrest Date/Charge_____
Complaint Against_____	Witness_____
Badge and Unit #_____	Address_____
Other Personnel Involved_____	Phone #_____
Badge and Unit #_____	Complaint Received By_____

**REMARKS**

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\_\_\_\_\_  
Signature (Optional)

Use Additional Paper if Necessary